

|   | (3 SEP 0 6 2006                       | 5       |              |   |                   |           | Sheet _1_ of                     | <u> </u>                   |               |  |
|---|---------------------------------------|---------|--------------|---|-------------------|-----------|----------------------------------|----------------------------|---------------|--|
| INFORMATION DISCLOSURE CITATION IN AN APPLICATION (Use several sheets if necessary) |                                       |         |              |   |                   |           | Application Number<br>10/719,646 |                            |               |  |
|   |                                       |         |              | Applicant Roland LEYERER, ET AL.                  |                   |           |                                  |                            |               |  |
|   |                                       |         |              | Filing Date Group Art Unit NOVEMBER 21, 2003 2125 |                   |           |                                  |                            |               |  |
|   | · · · · · · · · · · · · · · · · · · · |         | U. S. PATEI  | NT DOCUMENT                                       |                   | <u> </u>  |                                  |                            |               |  |
| EXAMINER  | DOCUMENT NUMBER                       | DATE    |              | NAME  | CI                | ASS.      | SUBCLASS                         | FILING DATE IF APPROPRIATE |               |  |
| INITIAL   | DOCUMENT NUMBER                       | DATE    |              | NAME  |                   | ,ASS      | 20BCLV22                         | APPRO                      | PRIATE        |  |
|   |                                       |         | <del> </del> |   |                   |           |                                  |                            |               |  |
|   |                                       |         |              | . <del></del>                                     |                   |           |                                  |                            |               |  |
| <del></del>   |                                       |         | <u> </u>     |   |                   |           |                                  |                            |               |  |
|   |                                       |         |              |   |                   |           |                                  |                            |               |  |
|   |                                       |         |              |   |                   |           |                                  |                            |               |  |
|   |                                       |         |              |   |                   |           |                                  |                            |               |  |
|   |                                       |         |              |   |                   | -         |                                  |                            |               |  |
|   |                                       |         |              |   |                   |           |                                  | ,                          |               |  |
|   |                                       |         |              |   |                   |           |                                  |                            |               |  |
|   |                                       |         |              |   |                   |           |                                  |                            |               |  |
|   |                                       | FO      | REIGN PAT    | TENT DOCUME                                       | NTS               |           |                                  |                            |               |  |
|   | DOCUMENT NUMBER                       | DATE    |              | COUNTRY   | CI                | ASS       | SUBCLASS                         | Trans<br>YES               | slation<br>NO |  |
| ZC  | EP 0284922 A2                         | 3/18/88 | EUROPEA      |   |                   |           | J GOBOLI 188                     | X                          | INO           |  |
| ZC  | DE 4404695 C2                         | 2/15/94 | GERMAN       | Y .   |                   |           |                                  | X                          |               |  |
| ZC  | DE 9400979.1                          | 1/21/94 | GERMAN       | Y   |                   | •         |                                  | X                          |               |  |
| ZC  | EP 0317591 B1                         | 5/19/88 | EUROPEA      | N UNION   |                   |           |                                  | X                          | ·             |  |
|   |                                       |         |              |   |                   |           |                                  |                            |               |  |
|   | OTHI                                  | ER DOC  | UMENTS (in   | cluding Author, Title, Da                         | ite, Pertinent Pa | ges, Etc. | )                                |                            | \             |  |
|   |                                       |         |              |   |                   |           |                                  |                            |               |  |
| •   |                                       |         |              |   |                   |           |                                  |                            |               |  |
|   |                                       |         |              |   |                   |           |                                  |                            |               |  |

**EXAMINER** 

/Zoila Cabrera/ (11/09/2006)

DATE CONSIDERED

EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP §609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to the applicant.